**BACKGROUND**

The rate of pregnancy smoking in Northeast Tennessee is three times the national average, and more than twice the rate for the rest of Tennessee. While many women are able to quit during pregnancy, the post-delivery smoking rate is high, particularly among women with mental health issues. In addition to multiple health risks that smoking poses to the mother, second-hand smoke increases the infant’s chance of health and developmental problems.

**OBJECTIVES**

The long-term objective is to identify predictors of postnatal smoking relapse and recommend an effective intervention.

In the current study, postnatal depression (PND) was hypothesized to be a predictive factor of post-delivery smoking.

**METHODS**

- The participants were recruited prenatally as a part of the Tennessee Intervention for Pregnant Smokers (TIPS) program (N=275).
- Edinburgh Postnatal Depression Scale was used as a measure of PND at six weeks postpartum.
- Smoking status was determined by self-reported number of cigarettes smoked on an average day.

**RESULTS**

- Over 25% of participants were found to be depressed postnatally.
- Income, education level, intimate partner violence, prenatal depression and PND were entered as potential predictors of post-partum smoking in a stepwise multiple regression model.
- PND was a significant predictor of postnatal smoking after control for covariates, with women with PND three times more likely to smoke after delivery.

**CONCLUSIONS**

- Healthcare providers need to screen new mothers for PND and smoking/smoking relapse.
- Addressing PND is likely to reduce smoking rates among mothers, improving the health of both women and their infants.